



FREE TO TAKE HOME!

FEBRUARY - MARCH 2022 EDITION



School refusal in children



Mobile phone use in kids



Ross River Virus



Plantar Fasciitis – heel pain

● PRACTICE DOCTORS

Dr Ivan Jansz

MBBS, Dip RACOG, DA(UK), FRACGP
Family General Practice, Anaesthetics, Shared Care
Obstetrics, Skin problems, General Medicine, Pain
Management

Dr Darryn Rennie

MBBS, FRACGP, DipACSCM
General Family Medicine, Skin Cancer, Children's
Health

Dr Kate Harding

BM(UK)DO, FRNZCGP, FRACGP
General Family Medicine

Dr Andrew Kirke

MBBS, FACRRM, FRACGP, DRANZCOG, DTMH
Family General Practice, GP Obstetrics

Dr Yien Peng Chin

MBBS, FRACGP, DipChildHealth
General Family Medicine, Children's Health

Dr Narelle Rodsjo

MBBS, FRACGP
Family medicine, Women's and Children's Health,
Musculoskeletal and Sporting Injuries

Dr Denise (Dee) Arnold

MBBS, FRACGP, Diploma of Sport & Exercise
General Practice with special interest in Women's
and Paediatric Medicine as well as Sports and
Musculoskeletal Medicine.

*The practice doctors are experienced
in the broad range of general practice
problems and the treatment of all age
groups.*

● PRACTICE STAFF

Practice Manager: Karen Hudson

Nurses: Rhona Morrison (RN, RM),
Lucy Webb-Martin (RN) & Jenni Boxsell
(RN)

Receptionists: Raelene, Deb, Mandy,
Claire, Fernanda & Tiana

● SURGERY HOURS

Monday.....7.00am-5.00pm

Tuesday - Friday.....8.30am-5.00pm

Saturday.....8.30am-11.30am

● AFTER HOURS & EMERGENCY

Dalyellup Family Medical Centre provides
after hours care within the practice.

Please phone **9795 6422** for the on-call
number, or attend Bunbury Regional
Hospital Emergency Department **9722
1000**.

A/H GP helpline **1800 022 222**.

▶ **Please see the Rear Cover for
more practice information.**

● BILLING ARRANGEMENTS

Private patients will pay a gap beyond the Medicare refund. This varies according to the complexity of service or if a procedure is performed.

We expect the account to be settled at the time of consultation. Gap payments may be allowed in consultation with the Doctor. Payment can be made by cash, cheque, credit card or EFTPOS. Please bring your Medicare card and any concession cards to your appointment.

We will bulk bill Pension Card Holders, children under 12 years and routine immunisations. Health Care Card and Commonwealth Seniors Card holders will be given a discounted fee.

A fee will apply for all procedural work, Saturday and evening surgery appointments.

Repeat Prescriptions may be issued at times but will attract a fee if there is no consultation.

● APPOINTMENTS

Consultation is by appointment. Urgent cases will be seen by an available doctor on the day.

Appointment Bookings. Appointments can be made online by going to www.dfmc.com.au or by calling the Practice on **9795 6422**.

Booking a long appointment. If you want an insurance medical, review of a complex health problem, counselling for emotional difficulties, or a second opinion, please book a longer appointment. This may involve a longer wait but your problem will get the attention it deserves. Please bring relevant letters and test results from other doctors.

It may not always be possible to see additional family members if only a single appointment has been made.

Home Visits. Your request for a home visit will be decided on in discussion with the doctor.

Results. All results are reviewed as soon as possible by the doctor. You may access relevant comments regarding your results by contacting the Surgery.

Telehealth and phone consultations are currently available during the COVID crisis. This service will be bulk billed for Pension Card holders and a private fee will apply for others. Please ask when booking.

● SPECIAL PRACTICE NOTES

Dr Jansz has admitting rights to St John of God Hospital, Bunbury.

Referrals. Doctors in this practice are competent at handling all the common health problems. When necessary, they are able to draw on opinion from Specialists, and if need be, refer you for further investigation. You can discuss this openly with your doctor.

Telephoning your doctor. Although most problems are best dealt with in consultation, a doctor will always be available during normal surgery hours for emergency advice. Our staff are experienced in helping you decide whether the matter requires an appointment, a return phone call from the practice, or urgent advice.

Patient Feedback. We welcome your comments or suggestions. Please feel free to talk to your GP or the Practice Manager regarding any issues. If you prefer, you can contact Health and Disability Services Complaints Office on 1800 813 583.

Patient Privacy. This practice protects your personal health information to ensure it is only available to authorised staff members for the intended purposes and to comply with the Privacy Act. To obtain a copy of our Privacy Statement or your medical records, please ask.

YOUR NEXT APPOINTMENT:

ENJOY THIS FREE NEWSLETTER

Please remember that decisions about medical care should be made in consultation with your health care provider so discuss with your doctor before acting on any of the information.

www.healthnews.net.au

School refusal in children and adolescents

This is where children experience severe emotional distress at having to go to school, which can lead to considerable absence from school, impacting education and job prospects.

It is completely different to truancy, where the child pretends to go to school but does not and is not associated with anti-social behaviour. School refusal is also entirely different from normal anxiety that may precede exams or school camps.

There is no specific known cause. The child may have various underlying worries about schoolwork, friendships, bullying, social isolation, conflicts with teachers, parental separation, or family grief or trauma. There may be no apparent underlying issue.

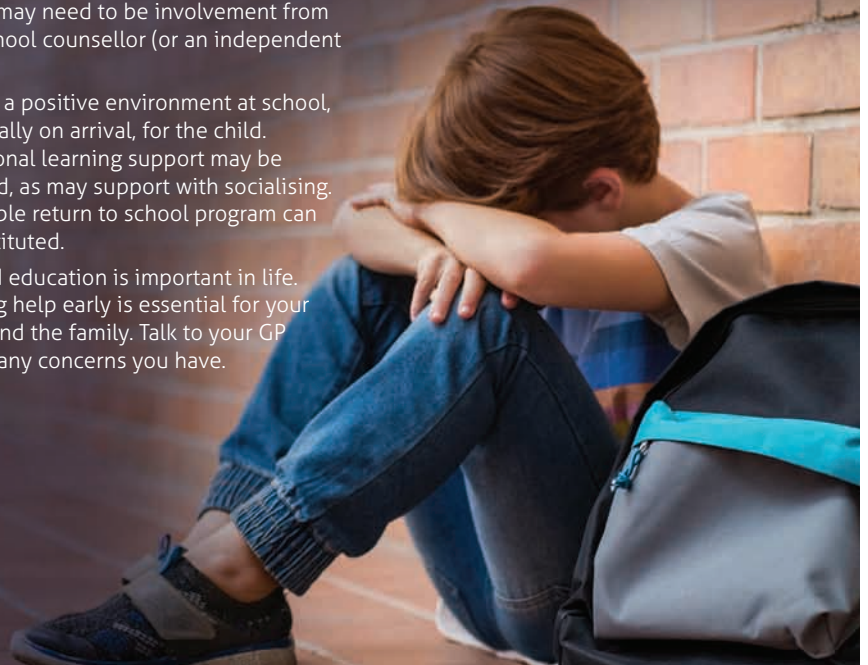
Symptoms include tearfulness before school, frequent complaints of somatic symptoms like headaches, tummy pains or dizziness before school but not on weekends through to tantrums before school.

A general medical check by your GP is important to ensure there are no other underlying medical issues. It is vital to manage the problem early. Parents,

teachers, the school and sometimes education bodies have a role. The family, as well as the child, will need support. There may need to be involvement from the school counsellor (or an independent one).

Create a positive environment at school, especially on arrival, for the child. Additional learning support may be needed, as may support with socialising. A flexible return to school program can be instituted.

A good education is important in life. Getting help early is essential for your child and the family. Talk to your GP about any concerns you have.



 <https://headspace.org.au/friends-and-family/understanding-school-refusal/>

Mobile phone use in kids

It is hard to believe that the ubiquitous mobile phone only became widely used in the 1990s and smart phones just this century.

Managing their use in children is something previous generations of parents did not have to contend with. There is a view that children should not use mobile phones, but you cannot rewind the clock. Certainly, there is research showing that too much total screen time is an issue in children, as they tend to exercise less, impacting sleep. Plus, the issue of social media access via mobile phone anywhere anytime.

Like all parenting, setting simple rules and sticking to them is key. This is also age-related. The notion of the "electronic babysitter" used to apply to TV but now can apply to phones. But handing a small child the phone as a way to keep them quiet is not a great idea on a regular basis. For primary school children, it can be useful to have a phone to ring parents. This can be an old-fashioned type that only makes phone calls and does not access the internet. Much like TV time can be restricted by parents, total screen time, including phones, can also be. Ensure phones are not kept in children's



bedrooms and are recharged in the kitchen or living room. In older children, ensure a net filter is installed. Lead by example, and don't be permanently attached to your own phone.

Most importantly, don't be afraid to set boundaries and be "the worst parent ever". The objections will settle, and your children will be better for it.



Changes in prescribing of medicinal cannabis

In November, the Therapeutic Goods Administration (TGA) introduced changes to how applications for medicinal cannabis are made and dispensed.

Medicinal Cannabis was legalised for use in Australia in 2016. It can be prescribed in conditions where the TGA accepts there is evidence for its use and where other treatments have failed to help or caused unacceptable side effects. The medications are unregistered, and thus far, applications have needed to specify the exact product by name and manufacturer. Approvals for use have grown from 3000 for the calendar year 2018 to over 100,000 in 2021 as of November.

The changes mean that doctors can apply for a type of medicinal cannabis based on amounts of cannabidiol (CBD) and tetrahydrocannabinol (THC). There are five categories. To switch between brands will not require new approval. This can be helpful

for all involved; however, pharmacists may dispense a medication other than what your doctor has prescribed. Generic prescribing works well where bio-equivalence studies have been done and medications have the exact same strength. These studies are not done with medicinal cannabis, and there can be significant differences between different formulations even when strengths are similar. In turn, this could lead to side effects or poorer control of symptoms if products that are similar but not the same are substituted.

Problems can be avoided. Your doctor can tick the "do not substitute" box on prescribing, and you can insist that you are dispensed that which you have been prescribed.



<https://www.betterhealth.vic.gov.au/health/conditionsandtreatments/ross-river-virus-disease>

Ross River Virus

This is a viral infection spread by mosquitos. It typically causes joint inflammation, muscle pain and fatigue.

Symptoms generally start between three and 21 days after being bitten. Other symptoms can include rash and enlarged lymph glands. Some people do not even know that they have it, as it can be no more than a flu-like illness.

It is common in most areas of Australia, particularly at inland waterways and coastal regions. Outbreaks can occur if high rainfall or floods lead to increased mosquito breeding.

Like a virus, there is no specific treatment. Symptomatic measures such as rest, maintaining hydration, and simple analgesics are recommended. With no specific features, diagnosis is by blood testing. Whilst everyone makes a recovery, some people are left with intermittent aching symptoms for a year or more. You cannot pass it on to other people.

You can reduce your chances of getting Ross River virus by avoiding mosquito bites; wear long, light-coloured, loose-fitting clothes, especially when in mosquito prone areas. Use effective insect repellents as per the manufacturer's instructions. If possible, avoid being outside in mosquito prone areas at dusk and dawn. If camping, use insect nets or fly wires. Reduce the number of potential mosquito breeding grounds around your home by getting rid of stagnant water. Ensure your pool or spa is well chlorinated, and don't let containers of water remain stagnate.

Plantar Fasciitis – heel pain

A common cause of heel pain, plantar fasciitis, is an inflammation of the tissue (plantar fascia), which runs along the sole of the foot, connecting the heel to the toes creating the foot's arch.

Risk factors include age, being overweight, sports that stress the heel (e.g. running) and spending long periods on the feet.

The main symptom is pain under the heel. It can be dull or sharp. It is often worse first up in the morning, after prolonged sitting or after intense activity. Diagnosis is largely based on history and examination. X rays generally do not show anything. Some changes in the fascia may be seen on ultrasound or MRI.

Treatment is a mix of improving symptoms and preventing further aggravation. Analgesics or anti-inflammatory medications may help

in the short term but are not a cure. Avoid activities that aggravate the situation. Wear shoes with good arch support and cushioning. Purpose made insoles may be helpful as can be stretching, as advised by a podiatrist or physiotherapist.

In more severe cases, cortisone injections may be recommended. Surgical treatment is viewed as a last resort.

Treatment is a medium-term proposition, so do not expect immediate results nor get frustrated. Perseverance with treatment is important, and most cases will improve with time.





Dalyellup Family Medical Centre

- **OTHER SERVICES OFFERED**
- Comprehensive health assessment for patients 75 years of age and older which includes a home visit by our nurse.
- Employment & Pre-Employment medicals with secure Drug & Alcohol testing collection.
- Full pathology collection services.
- All routine immunisations.
- Full time Practice Nurse/Midwife for routine blood pressure and blood sugar, wound dressings, etc.
- Specialist Nurse qualified to do cervical screening and women's health education.
- **Dalyellup Skin Care Clinic operates in the same building as Dalyellup Family Medical Centre.**

Services provided include:

- Skin cancer screening using Dermoscopy
- Treatment of pre-cancerous skin spots
- Biopsy and treatment of skin cancers
- Digital surveillance of atypical skin spots
- Total body photography
- General dermatology
- Corporate skin checks.

- **DR DARRYN RENNIE**

Dr Darryn Rennie is a GP with an interest in Skin Cancer Medicine, and he has a Diploma in Skin Cancer Medicine from the Australasian College of Skin Cancer Medicine.

- **PRIVATE BILLING**

Private billing applies to skin checks. A fee applies to procedures, with a portion of the fee claimable from Medicare.



RHUBARB & ONION CHUTNEY

Ingredients

- 500 grams rhubarb, roughly chopped
- 1 onion (medium) chopped
- 200 grams caster sugar
- 200ml cider vinegar
- 30 grams of fresh grated ginger
- ½ tablespoon of cloves

Directions

- STEP 1: Put the rhubarb, onion, caster sugar, cider vinegar, ginger, cinnamon stick and cloves in a preserving pan or large heavy-based pan. Bring to the boil, then cook over a medium heat for 1½ hours until the rhubarb has broken down and the mixture is jammy.
- STEP 2: Leave to cool in the pan for 10 minutes
- STEP 3: Divide between two sterilised jars while still hot. Seal and label.

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